## PATENT APPLICATION FEE DETERMINATION RECORD

e December 8, 2004

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Application or Docket Number 10/529269

|   |  | CLAIMS  | AS FILED                                    | - PART                              | ı                    |                                       |              | CMALL EN            | TITY                    |                            |              |                        |
|---|--|---|---|-------------------------------------|----------------------|---------------------------------------|--------------|---------------------|-------------------------|----------------------------|--------------|------------------------|
| (Column 1) (Column 1)   |  |   |   | (Column 2)                          |                      | SMALL ENTITY TYPE                     |              |                     | OTHER THAN SMALL ENTITY |                            |              |                        |
| U.S. NATIONAL STAGE FEES  |  |   |   |                                     |                      |                                       | 7            | RATE                | FEE                     | 7                          | RATE         | FEE                    |
| ВА  | SIC FEE  |   | SMALL EN                                    | T. = \$ 150                         | LAF                  | RGE ENT. = \$ 300                     | 1            | BASIC FEE           |                         | OR                         | BASIC FEE    | 2/17                   |
| EXAMINATION FEE   |  |   | Satisfies PCT                               | Article 33(1)-<br>0 / \$ 100        | •                    | other situations = \$ 100 / \$ 200    |              | EXAM. FEE           | 1                       | 1                          | EXAM. FEE    | 20                     |
| SEARCH FEE  |  |   | U.S. is ISA =<br>ALL other co<br>\$ 200 / 3 | ountries =                          | ,                    | other situations =<br>\$ 250 / \$ 500 |              | SEARCH FEE          |                         | 1.                         | SEARCH FEE   | 402                    |
| FEE FOR EXTRA SPEC. PGS.  |  |   | 408 mir                                     | nus 100 =                           | <i>3</i> Z           | <b>8</b> /50 =                        | 1            | .X \$ 125 =         |                         | 1                          | X \$ 250 =   | 170                    |
| TOTAL CHARGEABLE CLAIMS   |  |   | 79 minus 20 = .                             |                                     |                      | 59                                    |              | X \$ 25 =           |                         | OR                         | X \$ 50 =    | 2957                   |
| INDEPENDENT CLAIMS  |  |   | 6 minus 3 = . 3                             |                                     |                      | 3                                     | 1            | X \$ 100 =          |                         | OR                         | X \$ 200 =   | 60                     |
| MUI   | TIPLE DEPE   | NDENT CLAIM PR  | RESENT                                      |                                     |                      |                                       | 1            | + \$ 180 =          |                         | OR                         | + \$ 360 =   | 230                    |
| * If  | * If the difference in column 1 is less than zero, enter "0" in column 2 |   |   |                                     |                      |                                       | , ,          | TOTAL               |                         | OR                         | TOTAL        | 620                    |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)  CLAIMS HIGHEST |  |   |   |                                     |                      |                                       | SMALL ENTITY |                     |                         | OTHER THAN<br>SMALL ENTITY |              |                        |
| NT A  |  | REMAINING<br>AFTER<br>AMENDMENT   |   | NUME<br>PREVIO<br>PAID F            | BER<br>USLY          | PRESENT<br>EXTRA                      |              | RATE                | ADDI-<br>TIONAL<br>FEE  |                            | RATE         | ADDI-<br>TIONAL<br>FEE |
| <b>AMENDMENT</b>  | Total  | *   | Minus                                       | **                                  |                      | =                                     |              | X \$ 25 =           |                         | OR                         | X \$ 50 =    |                        |
| AME   | Independent  | *   | Minus                                       | ***                                 |                      | =                                     |              | X \$ 100 =          |                         | OR                         | X \$ 200 =   |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                           |   |   |                                     |                      |                                       | + \$ 180 =   |                     | OR                      | + \$ 360 =                 |              |                        |
|   |  |   |   |                                     |                      |                                       | •            | TOTAL ADDIT.<br>FEE |                         | OR                         | TOTAL ADDIT. |                        |
|   |  | (Column 1)  |   | (Colum                              | n 2)                 | (Column 3)                            |              |                     |                         | _                          |              |                        |
| NT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |   | HIGHE<br>NUMBI<br>PREVIOL<br>PAID F | ER<br>JSLY           | PRESENT<br>EXTRA                      |              | RATE                | ADDI-<br>TIONAL<br>FEE  |                            | RATE         | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT   | Total  | • .   | Minus                                       | **                                  |                      | =                                     |              | X \$ 25 =           |                         | OR                         | X \$ 50 =    |                        |
| AME   | independent  | *   | Minus                                       | ***                                 |                      | =                                     |              | X \$ 100 =          |                         | OR                         | X \$ 200 =   |                        |
|   | FIRST PRES   | ENTATION OF M   | ULTIPLE DEPE                                | NDENT C                             | AIM.                 |                                       |              | + \$ 180 =          |                         | OR                         | + \$ 360 =   |                        |
|   |  |   |   |                                     |                      |                                       | T            | OTAL ADDIT.<br>FEE  |                         | OR                         | FEE          |                        |
| *** (   | f the "Highest Nu<br>f the "Highest Nu                                   | mn 1 is less than the<br>mber Previously Paic<br>mber Previously Paid<br>nber Previously Paid | I For' IN THIS SPA<br>I For' IN THIS SPA    | ACE is less t<br>ACE is less t      | han '20'<br>han '3', | ', enter "20".<br>enter "3".          | n the a      | appropriate box i   | n column 1.             |                            | ·            |                        |